

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------------|----------------|
| FEE DETERMINATION | <i>[Signature]</i> | <i>6034</i> | <i>2/2/00</i> |
| O.I.P.E. CLASSIFIER | <i>[Signature]</i> | <i>11</i> | <i>2/2/00</i> |
| FORMALITY REVIEW | <i>[Signature]</i> | <i>60362</i> | <i>2/2/00</i> |
| RESPONSE FORMALITY REVIEW | <i>[Signature]</i> | | <i>1-25-01</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|------|
| Final | |
| Original | |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
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| Claim | Date |
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| Final | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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